

|                                                  |
|--------------------------------------------------|
| <u><b>FITT Card</b></u>                          |
| Name:_____                                       |
| Date:_____                                       |
| Program/Routine:_____                            |
| _____                                            |
| Exercise Frequency (/wk) - 1x 2x 3x 4x 5x        |
| Intensity (%) - < 50% 60% 70% 80% 90% 100%       |
| Time Spent/Session - _____                       |
| Type of Exercise - Cardio Bodyweight Weights Mix |
| Other - _____                                    |
| Rep Range Focus – 1-3 4-7 8-10 11-13 14-15+      |
| Notes:_____                                      |
| _____                                            |

|                                                  |
|--------------------------------------------------|
| <u><b>FITT Card</b></u>                          |
| Name:_____                                       |
| Date:_____                                       |
| Program/Routine:_____                            |
| _____                                            |
| Exercise Frequency (/wk) - 1x 2x 3x 4x 5x        |
| Intensity (%) - < 50% 60% 70% 80% 90% 100%       |
| Time Spent/Session - _____                       |
| Type of Exercise - Cardio Bodyweight Weights Mix |
| Other - _____                                    |
| Rep Range Focus – 1-3 4-7 8-10 11-13 14-15+      |
| Notes:_____                                      |
| _____                                            |

|                                                  |
|--------------------------------------------------|
| <u><b>FITT Card</b></u>                          |
| Name:_____                                       |
| Date:_____                                       |
| Program/Routine:_____                            |
| _____                                            |
| Exercise Frequency (/wk) - 1x 2x 3x 4x 5x        |
| Intensity (%) - < 50% 60% 70% 80% 90% 100%       |
| Time Spent/Session - _____                       |
| Type of Exercise - Cardio Bodyweight Weights Mix |
| Other - _____                                    |
| Rep Range Focus – 1-3 4-7 8-10 11-13 14-15+      |
| Notes:_____                                      |
| _____                                            |

|                                                  |
|--------------------------------------------------|
| <u><b>FITT Card</b></u>                          |
| Name:_____                                       |
| Date:_____                                       |
| Program/Routine:_____                            |
| _____                                            |
| Exercise Frequency (/wk) - 1x 2x 3x 4x 5x        |
| Intensity (%) - < 50% 60% 70% 80% 90% 100%       |
| Time Spent/Session - _____                       |
| Type of Exercise - Cardio Bodyweight Weights Mix |
| Other - _____                                    |
| Rep Range Focus – 1-3 4-7 8-10 11-13 14-15+      |
| Notes:_____                                      |
| _____                                            |